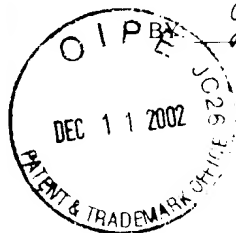


AF/1600-#

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: ASSISTANT COMMISSIONER OF PATENTS, WASHINGTON, DC 20231, ON THE DATE INDICATED BELOW.



DATE: December 6, 2002

**PATENT
BOX AF**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Patent Application of : Group Art Unit: 1644
Boris Skurkovich, *et al.* :
Appln. No.: 09/487,979 : Examiner: Amy DeCloux, Ph.D.
Filed: January 20, 2000 :
For: TREATMENT FOR AUTOIMMUNE : Attorney Docket
DISEASE, INCLUDING AIDS : No. **053663-5001-09**
: (0011-1U9)

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**NOTICE OF APPEAL FROM PRIMARY EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES**

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the Decision dated June 13, 2002, Paper No. 13, of the Primary Examiner finally rejecting claims 42 and 46 of the present application.

The item(s) checked below are appropriate:

- ☒ [X] A Petition for Extension of Time with extension fee for three (3) months up to and including December 13, 2002, to respond to the final Office Action mailed June 13, 2002, and a Response to the final Office Action are being filed simultaneously.
- ☐ [] A Petition for Extension of Time for ___ month(s) to file the Notice of Appeal and our check in the amount of \$ ___ for the extension fee are enclosed.
- ☒ [X] Please charge our firm's deposit account 50-0310 (**Billing No. 053663-5001-09**) for the amount indicated below for filing this Notice of Appeal:
- ☒ [X] \$160.00-- a Small Entity Declaration has been filed previously in this case.
- ☐ [] \$320.00 -- no Small Entity Declaration is appropriate.
- ☐ [] Not required (fee paid in prior appeal).

☐ An oral hearing before the Board of Appeals is respectfully requested.

☐ Our firm's check in the amount indicated below is enclosed for this request for an oral hearing.

☐ \$135.00 - a Small Entity Declaration has been filed previously in this case.

☐ \$270.00 - no Small Entity Declaration is appropriate.

☒ Any additional required fees or any overpayments may be charged or credited to Deposit Account No. 50-0310 (Billing No. **053663-5001-09**), one additional copy of this Notice is enclosed for accounting purposes.

Respectfully submitted,

BORIS SKURKOVICH, *ET AL.*

December 6, 2001
(Date)

By: _____

Kathryn Doyle

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Enclosures